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TCT@ACC-i2: The Interventional Learning Pathway

THE EFFICACY OF A 'REVERSED WIRE TECHNIQUE' FOR TREATING BIFURCATION LESIONS IN PERCUTANEOUS CORONARY INTERVENTION: TIPS & TRICKS" FOR SALVAGING THE SIDE BRANCH

Moderated Poster Contributions
Hall C
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Background: Wiring to cross extremely angulated bifurcation is distressed.

Methods: The aim of this study was to evaluate the safety and feasibility of a "Reversed Wire Technique [RWT]" for treating bifurcation lesions in PCI. This technique requires hydrophilic-coated wire with a hairpin bend curve at the tip and a double lumen microcatheter.

Results: Of 3,847 consecutive lesions treated with PCI from Aug 2009 to May 2013, RWT was used in 21 cases including 7 CTO cases. Of 18 bifurcation lesions treated with RWT, 18 cases had previous failed attempts of wiring to the side branch via regular methods (The mean number of used wire before RWT was 1.7±0.9). The bifurcation lesions treated with RWT were most frequently located in the left anterior descending artery (57%) followed by the left circumflex artery (24%), and the right coronary artery (19%). The mean angle between the main-vessel and the side-branch was 131±21 degrees. Successful wire crossing was achieved in 81% of cases. All cases using RWT underwent kissing-balloon inflation after wire-crossing. The patency of the side-branch immediately after the procedure was 100%, if RWT was successful.

Conclusions: The RWT is a useful method for the salvage of extremely angulated bifurcation lesions and for eliminating wasted wire, although this technique required several "Tips and Tricks". This technique also can be applied to CTO procedure.